

BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	NAME	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	H.I.	21 1079	5/18/01 06/29/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
1	✓ 102/03
2	- 10
3	0
4	0
5	N
6	N
7	0
8	0
9	0
10	0
11	0
12	0
13	0
14	0
15	0
16	N
17	N
18	N
19	N
20	0
21	N
22	N
23	N
24	N
25	N
26	0
27	N
28	N
29	N
30	N
31	N
32	N
33	N
34	N
35	N
36	N
37	N
38	0
39	N
40	N
41	N
42	N
43	N
44	N
45	N
46	0
47	N
48	N
49	N
50	✓ 10

Claim	Date
1	✓ 102/03
2	- 10
3	0
4	0
5	N
6	N
7	0
8	0
9	0
10	0
11	0
12	0
13	0
14	0
15	0
16	N
17	N
18	N
19	N
20	0
21	N
22	N
23	N
24	N
25	N
26	0
27	N
28	N
29	N
30	N
31	N
32	N
33	N
34	N
35	N
36	N
37	N
38	0
39	N
40	N
41	N
42	N
43	N
44	N
45	N
46	0
47	N
48	N
49	N
50	✓ 10

Claim	Date
1	✓ 102/03
2	- 10
3	0
4	0
5	N
6	N
7	0
8	0
9	0
10	0
11	0
12	0
13	0
14	0
15	0
16	N
17	N
18	N
19	N
20	0
21	N
22	N
23	N
24	N
25	N
26	0
27	N
28	N
29	N
30	N
31	N
32	N
33	N
34	N
35	N
36	N
37	N
38	0
39	N
40	N
41	N
42	N
43	N
44	N
45	N
46	0
47	N
48	N
49	N
50	✓ 10

If more than 150 claims or 10 actions
staple additional sheet here

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